ED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Joshua M. Kopelman Srinivas Balljepalli **Christopher Fralic**

Examiner: G. O'Connor

Application No.:

Group Art Unit: 3627

09/935,287 (Conf. No. 9679)

Filed: August 22, 2001

S&L Docket No. P23,305-A USA

METHOD AND APPARATUS FOR LISTING GOODS FOR SALE For:

CERTIFICATE OF MAILING

I hereby certify that this correspondence, along with any other papers indicated as being enclosed, is being deposited with the United States Postal Services, as first class mail, postage prepaid, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on May 11, 2005.

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

REPLY TO OFFICE ACTION DATED FEBRUARY 11, 2005

Sir:

This Reply is responsive to the Office Action, dated February 11, 2005, in the above-identified application. Reconsideration and reexamination of this application are requested respectfully in view of the following amendment and remarks.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 9 of this paper.

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Oquin 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								IALL EN	miry	OR	OTHER SMALL	
то	TAL CLAIMS		20				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8/	ASIC FEE	355.00	OR	BASIC FEE	710.00
TO	TAL CHARGEA	BLE CLAIMS	// minus 20=		. 0			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	2 minus 3 =		. 0		F	X40=			X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							H			OR		
A 15 Ab a d'Alexande in column d le font there are a color 600 in orbit and							L	+135=		OR	+270=	7 10
* If the difference in column 1 is less than zero, enter *O* in column 2							1	TOTAL		OR	TOTAL	40
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL (NTITY	OR	OTHER SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	••	20	- ·/		X\$ 9=		OR	X\$18=	
	Independent	• 3	Minus	ene .	<u>3</u>	5 /		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL DIT. FEE	L	OR	TOTAL ADDIT, FEE	
		(Column 1)	7	(Colu	mn 2)	(Column 3)	AU	IUII. PEC			AUUII. FEE	7
AMENDMENT B		CLAIMS REMAINING AFTER AMENDVENT		HIG NUM PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total V	W Wha a	Minus	**		•		X\$ 9=		OR	X\$18=	
	independent (130	Minus	***		= -	ļΓ	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [+135=		OR	+270=	
-13 ac								TOTAL ODIT. FEE		OR	ADDIT. FEE	
5-/5-05 (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST WBER TOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 25	Minus	**	20	-5		X\$ 9=		OR	X\$18=	250
FE	Independent	. 2	Minus	•••	3	=		X40=		OR	X80=	
ال	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	+270=	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135= TOTAL		OR		170
••	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number to								L	OR	ADDIT. FEE	2500
	The Highest Nu	mber Previously Pr	aid For" (Total o	r indepen	dent) is the	dmun tasrigiri e	er toun	d in the ap	propriate bo	x in c	otumn 1.	

Application or Docket Number